

**FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM**

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

BLD 2005-00449

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
PROPERTY OWNER'S NAME		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 3525 10 th Avenue North		Company NAIC Number
CITY Birmingham	STATE AL	ZIP CODE 35234
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 1B Southland Tube Resurvey No. 2		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Non-residential (Office Building Expansion)		
LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -###.###" or ###.####")		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:
HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Birmingham, Alabama 010116		B2. COUNTY NAME Jefferson	B3. STATE Alabama
B4. MAP AND PANEL NUMBER 01073C0316	B5. SUFFIX E	B6. FIRM INDEX DATE 6/16/99	B7. FIRM PANEL EFFECTIVE/REVISED DATE 1/20/99
B8. FLOOD ZONE(S) AE		B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 590.50	

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other (Describe):

B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929

☐ NAVD 1988 ☐ Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

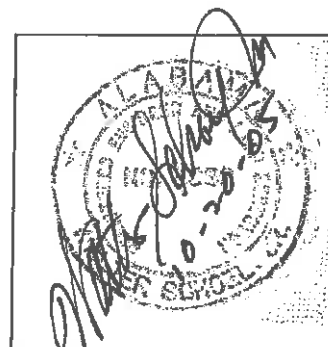
Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum NGVD 1929 Conversion/Comments

Elevation reference mark used Local Control Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

- o a) Top of bottom floor (including basement or enclosure) 591.70 ft.
- o b) Top of next higher floor 604.64 ft.
- o c) Bottom of lowest horizontal structural member (V zones only) N/A
- o d) Attached garage (top of slab) N/A
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) N/A
- o f) Lowest adjacent (finished) grade (LAG) 587.65 ft.
- o g) Highest adjacent (finished) grade (HAG) 588.88 ft.
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade
- o i) Total area of all permanent openings (flood vents) in C3.h

License Number, Embossed Seal, Signature, and Date



SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.

I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME Walter Schoel, Jr.		LICENSE NUMBER 3092	
TITLE Land Surveyor		COMPANY NAME Walter Schoel Engineering Company	
ADDRESS 1001 22nd Street South	CITY Birmingham	STATE AL	ZIP CODE 35205
SIGNATURE <i>Walter Schoel, Jr.</i>	DATE 10-20-05	TELEPHONE 205-323-6166	

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 3525 10th Avenue North			Policy Number
CITY Birmingham	STATE AL	ZIP CODE 35234	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

Benchmark is cross in Top of Wall at Diesel Tank - El. 590.50

There is no machinery or equipment which services the building visible at ground level. Air Conditioning Equipment is located on the roof of the building.

☐ Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number ____ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is ____ ft.(m) ____ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ____ ft.(m) ____ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?
☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

Walter Schoel, Jr.

ADDRESS

1001 22nd Street South

SIGNATURE

COMMENTS

CITY

Birmingham

DATE

10-20-05

STATE

AL

TELEPHONE

205-323-6166

ZIP CODE

35205

☐ Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

____ ft.(m)

Datum: ____

G9. BFE or (in Zone AO) depth of flooding at the building site is:

____ ft.(m)

Datum: ____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

☐ Check here if attachments